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MINUTES
HEALTH COMMISSION FINANCE AND PLANNING COMMITTEE MEETING
Tuesday March 2, 2021 2:00 p.m.
Remote Meeting via Webex Event

1) CALL TO ORDER

Present: Commissioner Edward Chow, MD, Member
Commissioner Dan Bernal
Commissioner Suzanne Giraud, ED.D

Excused: Commissioner Cecilia Chung, Chair

The meeting was called to order at 2:07pm. Commissioner Chow chaired the meeting.

2) APPROVAL OF THE MINUTES OF THE HEALTH COMMISSION FINANCE AND PLANNING COMMITTEE MEETING OF FEBRUARY 2, 2021

Action Taken: The Committee unanimously approved the February 2, 2021 minutes.

3) MONTHLY CONTRACTS REPORT

Michelle Ruggels, Director of the SFDPH Business Office, presented the report.

Commissioner Comments:

Regarding the HealthRight360 contract, Commissioner Chow stated that since this is a new contract, there should be a new contract summary form. He added that he looks forward to a full review of the DPH contracts with this vendor at a future meeting. Ms. Ruggels noted that all the vendor's monitoring reports have no outstanding issues identified.

Commissioner Chow asked if this program is part of Mental Health SF. Dr. Almeida stated that the program is part of Mental Health SF.

Regarding the UCSF Alliance Health Project contract, Commissioner Bernal asked for clarification regarding the funds added back by the BOS. Dean Goodwin, Assistant Director of HIV Services, stated that the added funding was moved over from another contract.

Commissioner Bernal asked if the new funding will help connect long-term survivors of HIV to services. Mr. Goodwin stated that the funding was originally under the Getting to Zero contract and is intended to connect long term survivors to mental health services.

Commissioner Chow asked if the contract's most recent monitoring report had any issues. Ms. Ruggels stated that the vendor received the highest rating possible on the most recent monitoring report.

Regarding the Heluna contract, Commissioner Chow asked how decisions are made regarding when to use the vendor staff versus using City staff who are disaster workers. Dr. Hali Hammer, Director of the San Francisco Health Network Ambulatory Care Services, stated that the vendor is used to fill positions difficult to fill with City disaster workers.

Action Taken: The Committee recommended that the full Health Commission approve the report.

- 4) **REQUEST FOR APPROVAL OF A NEW CONTRACT WITH AEROScout LLC FOR SOFTWARE LICENSING, SOFTWARE AND EQUIPMENT MAINTENANCE, AS WELL AS REQUIRED ACCOMPANYING PROFESSIONAL SERVICES TO MAINTAIN THE AEROScout REAL TIME LOCATION SYSTEM (RTLS) IN GOOD REPAIR AND WELL-TUNED. THE TOTAL PROPOSED CONTRACT AMOUNT IS \$1,680,013 WHICH INCLUDES A 12% CONTINGENCY FOR THE TERM OF JANUARY 1, 2021 THROUGH DECEMBER 31, 2025 (5 YEARS)**

Jeff Angst, DPH IT Project Director, presented the item.

Commissioner Comments:

Commissioner Chow asked why the projected costs for Laguna Honda Hospital (LHH) are greater than those attributed to Zuckerberg San Francisco General Hospital (ZSFG). Mr. Angst stated that LHH currently has a bigger footprint in EPIC because of its long-term patients.

Action Taken: The Committee recommended that the full Health Commission approve the contract.

- 5) **REQUEST FOR APPROVAL OF AN EMERGENCY CONTRACT WITH CHINESE HOSPITAL ASSOCIATION TO PROVIDE EMERGENCY SURGE BEDS IN RESPONSE TO THE COVID-19 PANDEMIC. THE TOTAL PROPOSED CONTRACT AMOUNT IS \$9,500,000 WHICH INCLUDES A 12% CONTINGENCY FOR THE TERM OF DECEMBER 1, 2020 THROUGH JUNE 30, 2021 (7 MONTHS).**

Kelly Hiramoto, LCSW, Special Projects Manager to the Health Director, presented the item.

Commissioner Comments:

Commissioner Chow noted that he has received income from the organization in the past year and therefore has a conflict. He recused himself from the vote on this contract and left the meeting during the discussion and vote on this item.

Commissioner Girardo asked if the June, 2021 end date for the contract is adequate time to utilize these services. Ms. Hiramoto stated that the timing is estimated to be enough. She added that if needed, the contract can be extended.

Action Taken: The Committee recommended that the full Health Commission approve the contract.

6) **REQUEST FOR APPROVAL OF A NEW CONTRACT WITH CORNERSTONE TECHNOLOGY PARTNERS II JV, TO PROVIDE A SOFTWARE SOLUTION THAT WILL MONITOR AND INVENTORY ALL MEDICAL "INTERNET OF THINGS" DEVICES CONNECTED TO THE SFDPH CLINICAL NETWORK. THE TOTAL PROPOSED CONTRACT AMOUNT IS \$1,204,00 WHICH INCLUDES A 12% CONTINGENCY FOR THE TERMS OF APRIL 1, 2021 THROUGH SEPTEMBER 30, 2024 (42 MONTHS)**

Marc Upchurch, Chief Information Security Officer, presented the item.

Commissioner Comments:

Commissioner Chow asked what the DPH used prior to this contact. Mr. Upchurch stated that the DPH did its best to minimize risk and added that this contact establishing comprehensive minimal protection.

Commissioner Chow asked if this product integrates with EPIC. Mr. Upchurch stated that the intent is to not integrate the two systems at this time.

Action Taken: The Committee recommended that the full Health Commission approve the contract.

7) **DRAFT 2018-19 CHARITY CARE REPORT**

Max Gara MPH, Health Program Planner, presented the item.

Commissioner Comments:

Commissioner Chow stated that he appreciated the report and noted that the report has grown over the years in its ability to understand how much charity care is being delivered throughout the hospitals in San Francisco.

Commissioner Chow noted that CPMC has done a commendable job with charity care at its campuses. He is concerned that some individuals with insurance still need charity care. He requested more information on why individuals with MediCal or Medicare coverage would also need charity care. Mr. Gara stated that some MediCal and Medicare patients need assistance with out of pocket expenses.

Commissioner Chow requested that the Healthy San Francisco data be given some context so the reader will understand why it is in the report. Mr. Gara stated that he will provide more context of this issue for the final report presentation.

Commissioner Bernal asked if the people who accessed services at the emergency departments are less likely to be connected to primary care. Mr. Gara stated that a significant amount of people accessing Charity Care services have trouble covering all their copays and out-of-pocket expenses. He added that Charity Care utilizers are less likely to be connected to a primary care provider.

8) **EMERGING ISSUES**

This item was not discussed.

9) **PUBLIC COMMENT**

There was no public comment.

10) **ADJOURNMENT**

The meeting was adjourned at 3:33pm.